			DRDER FO	R SUPP	LIES OR S	SERVIC	CES				PAC	GE 1 OF
	801 3		100000000000000000000000000000000000000				SELL LIZER					6
I. CONTRACT/PURCH. AGREEMENT NO. USZA22-02-D-001			DELIVERY ORDER	/ CALL NO.	3. DATE OF ORD 2002Oct21	DER/CALL		7RCH. REQU 22730107	EST NO.		5. PRIORIT	ry
6. ISSUED BY	- 860	CODE	USZA22	7. A	DMINISTERED	BY		CC	DE S2404	A		
U.S. SPECIAL OPERA 7701 TAMPA POINT E ATTN: DOROTHY LE MACDILL AFB FL 336	BLVD		<	105	MA BALTIMOR 500 BATTLEVIE NASSAS VA 2	W PKWY	SUITE 200	0			X O	ERY FOB EST THER edule if other)
9. CONTRACTOR		CODE	4V190		FACILITY		10. DE		OB POINT BY	(Date)		IF BUSINESS IS
BTG, INC. J. DAVID CRUMMETT 3877 FAIRFAX RIDGE F FAIRFAX VA 22030	ROAD						12. DE	SEE S	RMS		SM	ALL MADVANTAGED OMEN-OWNED
								IAIL INVO	ICES TO TH	E ADDRI	ESS IN B	LOCK
14. SHIP TO	z tosa	CODE		15. F	PAYMENT WILL	L BE MAD	EBY	CODE	525700		Harri.	
SEE SCHEDULE DFAS OM/FP PO BOX 7020 BELLEVUE NE						38005-1920					MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2.	
16. DELIVER	RY/ X	The state of	er/call is issued on a	nother Govt. ag	ency or in accordance	e with and sul	ect to terms	and condition	tion bottom	Manual Control		
OF PURCHA	SE	Reference your q		LOCAL VIEW				OTTO PROPERTY.	Pernish the fo			
ORDER		ORDER AS II	E. THE CONTR MAY PREVIOUS TIONS SET FOR	USLY HAVI	e been or is n	IOW MOD	FIED, SUE	JECT TO	ALL OF THE	TERMS	PURCH	ae
NAME OF CONTRACTOR SIGNATURE [T] If this box is marked, supplier must sign Acceptance and return the following number						TYPED NAME AND TITLE of copies:						DATE SIGNED (YYYYMMMDD)
17. ACCOUNTING		Carrier and Carrier	COLUMN TO SERVICE AND ADDRESS.	observation and							Y V	
See Schedule												
18. ITEM NO. 19. SCHEDULE OF SUPPLIES				PPLIES/ SEI	/ SERVICES 20.			O. QUANTITY ORDERED/ ACCEPTED* 21. UNIT 22. U			UNIT PRICE 23. AMOUNT	
		SEE S	CHEDL	ILE								
* If quantity accepted by				4. UNITED	STATES OF AN	MERICA				25. T	OTAL	\$15,000.00
quatity ordered, indicate quantity accepted below				Y: KARENE L.	SPURLIN	CON	TRACTING /	ORDERING (OFFICER	29. DOFFE	RENCES	
26. QUANTITY IN COLUMN 20 HAS BEEN						27. SHIP NO. 28. DO VOUCHER NO.			0. 30.			
INSPECTED RECEIVED ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED						DARTIAL 32. PAID BY			33. A	INITIALS 33. AMOUNT VERIFIED CORRECT FOR		
DATE SIGNATURE OF AUTHORIZED GOVT. REP.						31. PAYMENT			34.0	. CHECK NUMBER		
36. I certify this account is correct and proper for payment.					- Innered	COMPLETE						
DATE	DATE SIGNATURE AND TITLE OF CERTIFYING OFFICER						FINAL 35. BILL OF LADING NO.				ADING NO.	
37. RECEIVED AT		38. RECEIVED I	BY		RECEIVED YMMMDD)	40. TOT.	AL TAINERS	41. S/R A	CCOUNT N	O. 42. S	/R VOU	CHER NO.

SECTION B Supplies or Services and Prices

ITEM NO	SUPPLIES/SERVICES Repair parts COST -	UNIT	NTE	MAX AMOUNT
0007AG		Lot	\$	\$7,500.00
TTEM NO 0207AG	SUPPLIES/SERVICES Repair parts COST	UNIT	NTE \$	MAX AMOUNT \$7.500.00

ACRN AA AMOUNT: ACCOUNTING AND APPROPRIATION DATA 9730100.56SF SC3 52S4 UHCA16 010000 59200 013431 525700 F25700 \$15,000.00 REQUISITION C4A32022730107 SECTION C Descriptions and Specifications

INSTRUCTIONS TO TEAM EITC FOR EITC Repair Parts for SOCRATES CLIN 0007AG/0207AG

- 1.0 Background: These instructions provide specific guidance to utilize the Repair Parts CLIN of the EITC.
- 2.0 Period of Performance: 21 Oct 2002 through 20 Oct 2003
- 3.0 Program and/or location: SOCRATES
- 4.0 Repair Parts: For reimbursement contract line item (CLIN/SUBCLIN) 0007AG/0207AG, provide a copy of the receipt detailing the type of purchase, date, cost, and a monthly summary report listing all items purchased for SOCRATES during time periods specified.